

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF COLUMBIA**

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PETER P. STRZOK,

Plaintiff,

v.

ATTORNEY GENERAL WILLIAM F. BARR,  
in his official capacity, et al.,

Defendants.

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) Case No. 1:19-cv-2367-ABJ  
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**ERRATA**

Defendants file this errata regarding their motion to dismiss or, in the alternative, for summary judgment as to Count One and Count Two of Plaintiff's Complaint, and motion for summary judgment as to Count Three. Exhibit 8 and Exhibit 9 to Defendants' motion are included as attachments to this errata.

Dated: November 21, 2019

Respectfully submitted,

JOSEPH H. HUNT  
Assistant Attorney General

MARCIA BERMAN  
Assistant Branch Director

CHRISTOPHER R. HALL  
Assistant Branch Director

/s/ Bradley P. Humphreys  
BRADLEY P. HUMPHREYS  
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*Counsel for Defendants*

***Strzok v. Barr*, No. 1:19-CV-2367-ABJ**

## **Exhibit 8**

Standard Form 52

Rev 7/91

U S Office of Personnel Management

Guide to Processing Personnel Actions, Chapter 4

<b>PART A - Requesting Office</b> (Also complete Part B, Items 1,7-22,32,33,36 and 39)											
1 Actions Requested										2 Request Number	
3 For Additional Information Call (Name and Telephone Number)										4 Proposed Eff Date 08-10-2018	
5 Action Requested By (Typed Name, Title, Signature, and Request Date)						6 Action Authorized By (Typed Name, Title, Signature, and Date)					
<b>PART B - For Preparation of SF 50</b> (Use only codes in The Guide to Personnel Data Standards. Show all dates in month-day-year order.)											
1 Name (Last, First, Middle) STRZOK IL,PETER P						2 Social Security Number (P-1)		3 Date of Birth 03-07-1970		4 Effective Date 08-10-2018	
<b>FIRST ACTION</b>						<b>SECOND ACTION</b>					
5-A Code 357			5-B Nature of Action Termination			6-A Code			6-B Nature of Action		
5-C Code ZLL			5-D Legal Authority 28 USC 536			6-C Code			6-D Legal Authority		
5-E Code			5-F Legal Authority			6-E Code			6-F Legal Authority		
7 FROM: Position Title and Number  SUPVY SPECIAL AGENT-DAD PD: 400140 Position: 60010856						15 TO: Position Title and Number					
8 Pay Plan ES		9 Occ CD 1811		10 Grd/Lvl 00		11 Step/Rate 00		12 Tot Salary		13 Pay Basis PA	
12A Basic Pay \$180,009.00		12B Locality Adj \$0		12C Adj Basic Pay \$180,009.00		12D Other Pay \$45,002		16 Pay Plan		17 Occ CD	
18 Grd/Lvl		19 Step/Rate		20 Tot Salary/Award		21 Pay Basis		20A Basic Pay		20B Locality Adj	
20C Adj Basic Pay		20D Other Pay		22 Name and Location of Position's Organization  Federal Bureau of Investigation  WASHINGTON DC USA							
<b>EMPLOYEE DATA</b>											
23 Veterans Preference 2 1-None 3-10 Point/Disability 5-10 Point/Other 2-5 Point 4-10 Point/Compensable 6-10 Point/Compensable/30%						24 Tenure 0 0-None 2-Conditional 1-Permanent 3-Indefinite		25 Agency Use		26 Veterans Preference for RIF YES X NO	
27 FEGLI Z5 Basic + Option B (5x) + Option A + Option C (5x)						28 Annuitant Indicator 9 Not Applicable		29 Pay Rate Determinant 0 0-Regular Rate			
30 Retirement Plan M FERS and FICA Special				31 Service Comp Date (Leave) 09-27-1992		32 Work Schedule F Full Time				33 Part-Time Hours Per Biweekly Pay Period	
<b>POSITION DATA</b>											
34 Position Occupied 3 1-Competitive Service 3-SES General 2-Excepted Service 4-SES Career Reserved				35 FLSA Category E E-Exempt N-Nonexempt		36 Appropriation Code				37 Bargaining Unit Status 8888	
38 Duty Station Code 110010001				39 Duty Station (City-County-State or Overseas Location) WASHINGTON, DC Dist Columbia DC USA							
40 Agency Data		41		42		43		44			
45 Edu Lvl		46 Yr Degr Attd		47 Acad Disipl		48 Func Class		49 Citizenship 1 1-USA 8-Other		50 Veterans Status P Post VEV	
51 Supervisory Status 2 Supv/Mgr											
<b>PART C - Reviews and Approvals</b> (Not to be used by requesting office.)											
1 Office/Function		Initials/Signature		Date		1 Office/Function		Initials/Signature		Date	
A 2ND/SME MLEU		MARTEN,CAROLINE MGMT&PROG ANAL		08-13-2018		D COR					
B 3RD PPAPU		LOCKWOOD,LISA GOODMAN HR SPECIALIST (GENERA		08-14-2018		E CAN					
C PRO PPAPU		LOCKWOOD,LISA GOODMAN HR SPECIALIST (GENERA		08-14-2018		F OTHER					
2. Approval: I certify that the information entered on this form is accurate and the proposed action is in compliance with statutory and regulatory requirements.						Signature			Approval Date		

CONTINUED ON REVERSE SIDE

OVER

Editions Prior to 7/91 Are Not Usable After 6/30/93

Name: STRZOK II,PETER P

PAR Number:

**PART D - Remarks by Requesting Office**

(Note to Supervisors: Do you know of additional or conflicting reasons for the employee's resignation/retirement?

If ""YES"", please state these facts on a separate sheet and attach to SF52).

☐ YES ☐ NO**PART E - Employee Resignation/Retirement****Privacy Act Statement**

You are requested to furnish a specific reason for your resignation or retirement and a forwarding address. Your reason may be considered in any future decision regarding your re-employment in the Federal service and may also be used to determine your eligibility for unemployment compensation benefits. Your forwarding address will be used primarily to mail you copies of any documents you should have or any pay or compensation to which you are entitled.

This information is requested under authority of sections 301, 3301, and 8506 of title 5, U.S. Code. Sections 301 and 3301 authorize OPM and agencies to issue

regulations with regard to employment of individuals in the Federal service and their records, while section 8506 requires agencies to furnish the specific reason for termination of Federal service to the Secretary of Labor or a State agency in connection with administration of unemployment compensation programs.

The furnishing of this information is voluntary; however, failure to provide it may result in your not receiving: (1) your copies of those documents you should have; (2) pay or other compensation due you; (3) any unemployment compensation benefits to which you may be entitled.

1. Reasons for Resignation/Retirement (NOTE: Your reasons are used in determining possible unemployment benefits.

Please be specific and avoid generalizations.

Your resignation/retirement is effective at the end of the day - midnight - unless you specify otherwise.)

**Termination**

2 Effective Date

3 Your Signature

4 Date Signed

5 Forwarding Address (Number, Street, City, State, ZIP Code)

08-10-2018

STRZOK II,PETER P

**PART F - Remarks for SF 50**

- SF 2819 was provided. Life insurance coverage is extended for 31 days during which you are eligible to convert to an individual policy

(nongroup contract).

- Forwarding address: [REDACTED]

- Lump-sum payment to be made for any unused annual leave.

- Reason(s) for removal: Adjudication of Disciplinary Action

***Strzok v. Barr*, No. 1:19-CV-2367-ABJ**

## **Exhibit 9**

1. Name (Last, First, Middle) <b>STRZOK II, PETER P</b>						2. Social Security Number (P-1) <b>[REDACTED]</b>		3. Date of Birth <b>03/07/70</b>		4. Effective Date <b>08/10/18</b>		
<b>FIRST ACTION</b>						<b>SECOND ACTION</b>						
5-A. Code <b>357</b>		5-B. Nature of Action <b>TERMINATION</b>				6-A. Code		6-B. Nature of Action				
5-C. Code <b>ZLL</b>		5-D. Legal Authority <b>28 USC 536</b>				6-C. Code		6-D. Legal Authority				
5-E. Code		5-F. Legal Authority				6-E. Code		6-F. Legal Authority				
7. FROM: Position Title and Number <b>SUPVY SPECIAL AGENT-DAD 60010856 400140</b>						15. TO: Position Title and Number						
8. Pay Plan <b>ES</b>		9. Occ. Code <b>1811</b>		10. Grade or Level <b>00</b>		11. Step or Rate <b>00</b>		12. Total Salary <b>180,009.00</b>		13. Pay Basis <b>PA</b>		
12A. Basic Pay <b>180,009.00</b>		12B. Locality Adj. <b>.00</b>		12C. Adj. Basic Pay <b>180,009.00</b>		12D. Other Pay <b>.00</b>		16. Pay Plan		17. Occ. Code		
20A. Basic Pay		20B. Locality Adj. <b>.00</b>		20C. Adj. Basic Pay		20D. Other Pay <b>.00</b>		18. Grade or Level		19. Step or Rate		
14. Name and Location of Position's Organization <b>FEDERAL BUREAU OF INVESTIGATION HEADQUARTERS D3-HUMAN RESOURCES DIVISION</b>						22. Name and Location of Position's Organization  <b>8A DJ AV0103030000000000 PP 16 2018</b>						
<b>EMPLOYEE DATA</b>												
23. Veterans Preference <b>2</b> 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/30%						24. Tenure <b>0</b> 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite			25. Agency Use		26. Veterans Preference for RIF <b>X</b> YES <input type="checkbox"/> NO	
27. FEGLI <b>Z5 BASIC-STANDARD-5X ADDITIONAL-5X FAM</b>						28. Annuitant Indicator <b>9 NOT APPLICABLE</b>			29. Pay Rate Determinant <b>0 NOT APPLICABLE</b>			
30. Retirement Plan <b>M FERS AND FICA SPECIAL</b>				31. Service Comp. Date (Leave) <b>09/27/92</b>		32. Work Schedule <b>F FULL TIME</b>			33. Part-Time Hours Per Biweekly Pay Period			
<b>POSITION DATA</b>												
34. Position Occupied <b>3</b> 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved				35. FLSA Category <b>E</b> E - Exempt N - Nonexempt		36. Appropriation Code			37. Bargaining Unit Status <b>8888</b>			
38. Duty Station Code <b>11-0010-001</b>				39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON DIST OF COLUMBIA DC</b>								
40. Agency Data		41. SEX: M		42. CITZ: 1		43. VET STAT: P		44. ED LV:13 YR:91 INST PRG:450901				
45. Remarks SF 2819 was provided. Life insurance coverage is extended for 31 days during which you are eligible to convert to an individual policy (nongroup contract). Forwarding address: [REDACTED] Lump-sum payment to be made for any unused annual leave. Reason(s) for removal: Adjudication of Disciplinary Action												
46. Employing Department or Agency <b>U.S. DEPARTMENT OF JUSTICE</b>						50. Signature/Authentication and Title of Approving Official <b>ELECTRONICALLY SIGNED BY: DAVID W. SCHLENDORF ASSISTANT DIRECTOR</b>						
47. Agency Code <b>DJ AV</b>		48. Personnel Office ID <b>4017</b>		49. Approval Date <b>08/11/18</b>								